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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: | Identify Yourself | | |
|--------------------|-----------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| you pict exa | | Write the name that is on your government-issued picture identification (for example, your driver's | Lisa First name | First name |
| | license or passport). | Middle name | Middle name | |
| | iden | g your picture tification to your ting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | ide your married or den names. | | |
| 3. | you num Indi | the last 4 digits of Social Security Seer or federal Vidual Taxpayer tification number | xxx-xx-6988 | |
| | | | | |

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Case number (if known)

Debtor 1 Lisa A Loisi

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | | |
| | | 15318 Los Robles Oak Forest, IL 60452 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |

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Document Case number (if known) Debtor 1 Lisa A Loisi

| 7. | The chapter of the Bankruptcy Code you are | | | rief description of each, see <i>Notice Required</i> go to the top of page 1 and check the appropriate the control of the control o | by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy | | |
|-----|---|-----------|---|---|---|--|--|
| | choosing to file under | _ | , | | | | |
| | | Chapter 7 | | | | | |
| | | | napter 11 | | | | |
| | | | napter 12 | | | | |
| | | | napter 13 | | | | |
| 8. | How you will pay the fee | - | about how yo | u may pay. Typically, if you are paying the fee attorney is submitting your payment on your b | neck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with | | |
| | | | | the fee in installments. If you choose this o in Installments (Official Form 103A). | ption, sign and attach the Application for Individuals to Pay | | |
| | | | I request tha | my fee be waived (You may request this op | tion only if you are filing for Chapter 7. By law, a judge may, | | |
| | | | but is not req | ired to, waive your fee, and may do so only if r family size and you are unable to pay the fe | your income is less than 150% of the official poverty line that e in installments). If you choose this option, you must fill out | | |
| | | | | | Official Form 103B) and file it with your petition. | | |
| | | | | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | |
| | last o years? | ☐ Yes | | When | Coop number | | |
| | | | District District | When When | Case number Case number | | |
| | | | District | When | Case number Case number | | |
| | | | DISTRICT | | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | 3. | | | | |
| | | | Debtor | | Relationship to you | | |
| | | | District | When | Case number, if known | | |
| | | | Debtor | | Relationship to you | | |
| | | | District | When | Case number, if known | | |
| | | | Cotol | ne 12. | | | |
| 11. | Do you rent your | ■ No | | | | | |
| 11. | Do you rent your residence? | ■ No. | • | ur landlord obtained an eviction iudament aga | inst you and do you want to stav in your residence? | | |
| 11. | | ■ No. | s. Has yo | | ninst you and do you want to stay in your residence? | | |
| 11. | | | • | No. Go to line 12. | ninst you and do you want to stay in your residence? on Judgment Against You (Form 101A) and file it with this | | |

Document Page 4 of 49 Case number (if known) Debtor 1 Lisa A Loisi Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Lisa A Loisi Document Page 5 of 49 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Dei | LISA A LOISI | | | Case Hull | IIDEI (if known) | |
|-----|--|--|--|---|---|--|
| Par | t 6: Answer These Quest | ions for R | eporting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. | individual primarily for a pe | consumer debts? Consumer debts are dersonal, family, or household purpose." | defined in 11 U.S.C. § 101(8) as "incurred by an | |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16b. | | business debts? Business debts are delevestment or through the operation of the business debts. | | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you | u owe that are not consumer debts or busi | ness debts | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapt | ter 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | 7. Do you estimate that after any exempt p available to distribute to unsecured creditors. | roperty is excluded and administrative expenses ors? | |
| | administrative expenses | | ■ No | | | |
| | are paid that funds will be available for | | ☐ Yes | | | |
| | distribution to unsecured creditors? | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 | | □ 1,000-5,000 | □ 25,001-50,000 | |
| | | ☐ 50-99 |) | 5 001-10,000 | 5 0,001-100,000 | |
| | | □ 100-1 □ 200-9 | | □ 10,001-25,000 | ☐ More than100,000 | |
| 19. | How much do you | □ \$0 - \$ | 550,000 | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | |
| | | ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | □ \$100,000,001 - \$100 million | ☐ More than \$50 billion | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$ | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | to be? | | 001 - \$100,000 ,001 - \$500,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | |
| | | | ,001 - \$500,000 ,001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | |
| Par | t 7: Sign Below | | | | | |
| For | you | I have ex | camined this petition, and I c | declare under penalty of perjury that the in | formation provided is true and correct. | |
| | | | | r 7, I am aware that I may proceed, if eligit e relief available under each chapter, and | ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | | I reques | relief in accordance with the | e chapter of title 11, United States Code, s | specified in this petition. | |
| | | bankrupt and 357 | tcy case can result in fines u | | ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, | |
| | | Lisa A | | Signature of De | btor 2 | |
| | | Execute | d on May 9, 2017 | Executed on | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | |

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Debtor 1 Lisa A Loisi Page 7 01 49 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Eric Zelazny | Date | May 9, 2017 | |
|--|---------------|-----------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Eric Zelazny Printed name | | | |
| Law Offices of Eric Zelazny Firm name | | | |
| 18400 Maple Creek Drive Suite 600 Chicago Heights, IL 60411 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone 708-444-4333 | Email address | eric@lwslaw.com | |
| Bar number & State | | | |

| | | Docume | ent Page 8 of 49 | |
|---------------------|--------------------------|-------------------|------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lisa A Loisi | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | ☐ Check if this is an |
| (ii kilowii) | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 11: Summarize Your Assets | | |
|-----|--|-------------|---------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 230,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,700.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 234,700.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 232,092.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 108,531.00 |
| | Your total liabilities | \$ | 340,623.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,322.39 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,283.56 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | chedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a persona | l, family, or |

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

1,522.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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|------------|-----------------------------|---|------------------------------|---------------------------------------|--|------------------------------------|-------------|---|
| Fill | in this inf | ormation to identif | y your case and t | | | | | |
| Deb | otor 1 | Lisa A Lois | | lle Name | Last Name | | | |
| | otor 2 use, if filing) | First Name | Mido | lle Name | Last Name | | | |
| Unit | ted States | Bankruptcy Court fo | or the: NORTHE | RN DISTRICT OF ILLII | NOIS | | | |
| Cas | se number | | | | _ | | | Check if this is an amended filing |
| SC 1 ea | chedu | | roperty describe items. List | | an asset fits in more than one o | | | |
| nfor | mation. If n ver every q | nore space is needed uestion. | , attach a separate | sheet to this form. On th | e are filing together, both are e e top of any additional pages, vn or Have an Interest In | | | |
| | No. Go to | , , | ngultable interest in | any residence, building | , land, or similar property? | | | |
| 1.1 | 440046 | . . | | What is the property | ? Check all that apply | | | |
| | | S Pinecreek ess, if available, or other de | escription | | home ti-unit building or cooperative | the amount of any | secured cl | s or exemptions. Put aims on Schedule D: Secured by Property. |
| | Orland City | Park IL State | 60467-0000 ZIP Code | ☐ Manufactured ☐ Land ☐ Investment pr | or mobile home | Current value of tentire property? | p | current value of the ortion you own? |
| | | | | ☐ Timeshare ☐ Other | t in the property? Check one | Describe the natu | ure of your | ownership interest y by the entireties, or |
| | Cook | | | Debtor 2 only | | | | |
| | County | | | | f the debtors and another | (see instructions | | nity property |
| 2 | Add the d | Iollar value of the | portion you own f | property identificati | | | | |
| | | | | | rom Part 1, including any e | | | \$230,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Desc Main

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|-------------------------------|---|-----------------------------------|---|---|---|
| Debtor 1 | Lisa A Loisi | | | Case number (if known) | |
| ☐ Yes. | Describe | | | | |
| □ No | | , furs, leather coats | s, designer wear, shoes, | accessories | |
| — 100. | | ad Warranda Cla | ath in a | | \$200.00 |
| | US | ed Women's Clo | otning | | <u> </u> |
| □ No | | costume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, gems, | gold, silver |
| | Use | ed Wedding Rin | ıg | | \$200.00 |
| Exam _l ■ No □ Yes. | rm animals bles: Dogs, cats, birds, Describe her personal and hou | | ı did not already list, iı | ncluding any health aids you did not list | |
| _ | Give specific informat | ion | | | |
| for P | | per here | om Part 3, including a | ny entries for pages you have attached | \$1,550.00 |
| Do you ov | vn or have any legal o | or equitable intere | est in any of the follow | ing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | ,, | , , | our home, in a safe depo | osit box, and on hand when you file your peti | tion |
| Exam _l | | | I accounts; certificates counts with the same ins | of deposit; shares in credit unions, brokerage titution, list each. | houses, and other similar |
| □ No ■ Yes. | | | Institution n | ame: | |
| | 17 | .1. Checking | BMO Hari | ris | \$150.00 |
| | , mutual funds, or pu bles: Bond funds, inves | | ks th brokerage firms, mor | ney market accounts | |
| ☐ Yes. | | Institution or is | suer name: | | |
| | ublicly traded stock a renture | nd interests in in | corporated and uninco | orporated businesses, including an intere | st in an LLC, partnership, and |
| | Give specific informat | ion about them Name of entity: | | % of ownership: | |

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document Debtor 1 Lisa A Loisi 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information..

No

| | Case 17-14577 | Doc 1 | Filed 05/09/17 Document | Entered 05/09/17 16:33:02 Page 14 of 49 Case number (if known) | Desc Main |
|----------------|--|--------------------------|----------------------------|--|----------------------------|
| Debtor 1 | Lisa A Loisi | | | Case number (if known) | |
| Examp ■ No | • | | ealth savings account (I | HSA); credit, homeowner's, or renter's insurar | nce |
| ☐ Yes. | Name the insurance compa Com | nny of each popany name: | licy and list its value. | Beneficiary: | Surrender or refund value: |
| If you a someo | erest in property that is dare the beneficiary of a living ne has died. Give specific information | | | d surance policy, or are currently entitled to rece | eive property because |
| Examp ■ No | against third parties, who les: Accidents, employmen Describe each claim | | | t or made a demand for payment to sue | |
| ■ No | contingent and unliquidate | ed claims of | every nature, including | g counterclaims of the debtor and rights to | set off claims |
| ■ No | ancial assets you did not Give specific information | already list | | | |
| | _ | | | ny entries for pages you have attached | \$150.00 |
| Part 5: Des | scribe Any Business-Related | Property You | Own or Have an Interest I | n. List any real estate in Part 1. | |
| No. Go | own or have any legal or equito Part 6. to Part 8. to to line 38. | table interest i | n any business-related pr | operty? | |
| | scribe Any Farm- and Comme ou own or have an interest in fa | | | n or Have an Interest In. | |
| ■ No. | own or have any legal or Go to Part 7. Go to line 47. | equitable in | terest in any farm- or c | commercial fishing-related property? | |
| Part 7: | Describe All Property You | Own or Have a | n Interest in That You Did | Not List Above | |
| Examp ■ No | have other property of an oles: Season tickets, country | / club membe | | | |

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 Lisa A Loisi

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | \$230,000.00 |
| 56. | Part 2: Total vehicles, line 5 | \$3,000.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,550.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$150.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$4,700.00 | Copy personal property total | \$4,700.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$234,700.00 |

Official Form 106A/B Schedule A/B: Property page 6

| | | 17/1/11111 | III I (IIII, III (II 4) | |
|---|-------------------------|-------------------|-------------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lisa A Loisi | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | amended filin |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Copy the value from Schedule A/B Spinecreek Orland Park, IL \$230,000.00 \$0.00 | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--|--|---|-----|---|------------------------------------|
| Solution | | | Che | eck only one box for each exemption. | |
| Line from Schedule A/B: 1.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2006 of fair market value, up to mark | • | \$230,000.00 | | \$0.00 | 735 ILCS 5/12-901 |
| miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 miles Line from Schedule A/B: 3.1 2006 of fair market value, up to any applicable statutory limit 2007 of fair market value, up to any applicable statutory limit 2008 of fair market value, up to any applicable statutory limit 2009 of fair market value, up to any applicable statutory limit | • | | | · • | |
| Line from Schedule A/B: 3.1 2005 Chevrolet Trailblazer 156,000 s3,000.00 miles Line from Schedule A/B: 3.1 Used Bedroom, Living Room and Kitchen Furniture Line from Schedule A/B: 6.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) | | \$3,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| miles Line from Schedule A/B: 3.1 Used Bedroom, Living Room and Kitchen Furniture Line from Schedule A/B: 6.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 □ 100% of fair market value, up to any applicable statutory limit Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 □ 100% of fair market value, up to any applicable statutory limit Too% of fair market value, up to 100% of fair | | | | · • | |
| Used Bedroom, Living Room and Kitchen Furniture Line from Schedule A/B: 6.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 S1,000.00 \$1,000.00 100% of fair market value, up to any applicable statutory limit Too any applicable statutory limit 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) | | \$3,000.00 | • | \$600.00 | 735 ILCS 5/12-1001(b) |
| Kitchen Furniture Line from Schedule A/B: 6.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 | Line from Schedule A/B: 3.1 | | | · • | |
| Line from Schedule A/B: 6.1 Two Used Televisions and Used Computer Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit **Too.00** \$150.00** \$150.00** 100% of fair market value, up to any applicable statutory limit **Too.00** 100% of fair market value, up to any applicable statutory limit | | \$1,000.00 | • | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Computer Line from Schedule A/B: 7.1 S130.00 100% of fair market value, up to | | | | · • | |
| Line from Schedule A/B: 7.1 | | \$150.00 | | \$150.00 | 735 ILCS 5/12-1001(b) |
| arry approache statutory mine | | | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 1 Lisa A Loisi

Case number (if known)

| - | LISE A LOISI | | | | | |
|----|---|--------------------------------------|--------|---|-----------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Che | | | |
| | Used Women's Clothing Line from Schedule A/B: 11.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(a) | |
| | Line Holli Schedule A/B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Used Wedding Ring Line from Schedule A/B: 12.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) | |
| | Line Holli Gareage 7/2. 12-1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Checking: BMO Harris Line from Schedule A/B: 17.1 | \$150.00 | | \$150.00 | 735 ILCS 5/12-1001(b) | |
| | Line Holli Schedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No | | | led on or after the date of adjustme | nt.) | |
| | ☐ Yes. Did you acquire the property cover☐ No | ed by the exemption wi | thin 1 | ,215 days before you filed this case | ? | |
| | ☐ Yes | | | | | |
| | | | | | | |

| | | Document Pa | age 18 d | <u> </u> | | |
|--|---|--|--------------------|---|--|-------------------|
| Fill in this informatio | n to identify you | ır case: | | | | |
| Debtor 1 Li | isa A Loisi | | | | | |
| | st Name | Middle Name Las | t Name | | | |
| Debtor 2 | and Nieuwa | Middle Norse | . N | | | |
| (Spouse if, filing) Fir | st Name | Middle Name Las | t Name | | | |
| United States Bankrup | tcy Court for the | NORTHERN DISTRICT OF ILLINOI | IS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amen | ded filing |
| Official Form 10 | neD | | | | | |
| | | Mb a Harra Claima Ca | | h. Duanant | | |
| schedule D: | Creditors | Who Have Claims Se | curea | by Propert | <u>y</u> | 12/15 |
| | | If two married people are filing together, bo | | | | |
| s needed, copy the Add number (if known). | itional Page, fill it | out, number the entries, and attach it to thi | s form. On t | ne top of any addition | nai pages, write your na | me and case |
| . Do any creditors have | claims secured b | y your property? | | | | |
| ☐ No. Check this | box and submit t | his form to the court with your other sche | edules. You | have nothing else t | o report on this form. | |
| Yes. Fill in all o | f the information | | | ŭ | • | |
| | i ine inionnation | below. | | | | |
| | | below. | | | | |
| Part 1: List All Sec | cured Claims | | a a parataly | Column A | Column B | Column C |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th | s. If a creditor has an one creditor has | more than one secured claim, list the creditors as a particular claim, list the other creditors in Pa | | Column A Amount of claim | Column B Value of collateral | Unsecured |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th | s. If a creditor has an one creditor has | more than one secured claim, list the creditor | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th much as possible, list the | s. If a creditor has an one creditor has claims in alphabet | more than one secured claim, list the creditors as a particular claim, list the other creditors in Pa | art 2. As | Amount of claim | Value of collateral | Unsecured portion |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th much as possible, list the | s. If a creditor has an one creditor has claims in alphabet | more than one secured claim, list the creditor s a particular claim, list the other creditors in Pacal order according to the creditor's name. | art 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2. List All Secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress | s. If a creditor has an one creditor has claims in alphabet ortgage LLC | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim of the creditor's name, and the creditor's name. 11984 S Pinecreek Orland Park, 60467 Cook County | art 2. As all aim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2. List All Secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd | s. If a creditor has an one creditor has claims in alphabet ortgage LLC | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim 1984 S Pinecreek Orland Park, 60467 Cook County As of the date you file, the claim is: Check apply. | art 2. As all aim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 | s. If a creditor has an one creditor has claims in alphabet ortgage LLC Waters | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim Secure Property that secures the claim Secure County As of the date you file, the claim is: Check apply. Contingent | art 2. As all aim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
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| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 Number, Street, City, Swho owes the debt? Coppell Debtor 1 only | s. If a creditor has an one creditor has claims in alphabet ortgage LLC Waters 5019 State & Zip Code | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim 1984 S Pinecreek Orland Park, 60467 Cook County As of the date you file, the claim is: Check apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. | aim: IL all that | Amount of claim Do not deduct the value of collateral. \$232,092.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 Number, Street, City, S | s. If a creditor has an one creditor has claims in alphabet ortgage LLC Waters 5019 State & Zip Code Check one. | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim Se | aim: IL all that | Amount of claim Do not deduct the value of collateral. \$232,092.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 Number, Street, City, Street, City, Street and Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | s. If a creditor has an one creditor has claims in alphabet ortgage LLC Waters 5019 State & Zip Code Check one. | more than one secured claim, list the creditors a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim 1984 S Pinecreek Orland Park, 60467 Cook County As of the date you file, the claim is: Check apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortg car loan) | aim: IL all that | Amount of claim Do not deduct the value of collateral. \$232,092.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 Number, Street, City, S Who owes the debt? Competer 1 only Debtor 1 only Debtor 2 only At least one of the del | s. If a creditor has an one creditor has claims in alphabet ortgage LLC Waters 5019 State & Zip Code Check one. | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim 1984 S Pinecreek Orland Park, 60467 Cook County As of the date you file, the claim is: Check apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortg car loan) Statutory lien (such as tax lien, mechanic | aim: IL all that | Amount of claim Do not deduct the value of collateral. \$232,092.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 Number, Street, City, S Who owes the debt? Competer 1 only Debtor 1 only Debtor 2 only At least one of the del Check if this claim re | s. If a creditor has an one creditor has an one creditor has claims in alphabet ortgage LLC Waters 5019 State & Zip Code Check one. | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim 1984 S Pinecreek Orland Park, 60467 Cook County As of the date you file, the claim is: Check apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortg car loan) Statutory lien (such as tax lien, mechanic Judgment lien from a lawsuit | aim: IL all that | Amount of claim Do not deduct the value of collateral. \$232,092.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Nationstar Mo Creditor's Name 8950 Cypress Blvd Coppell, TX 75 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del | s. If a creditor has an one creditor has claims in alphabet ortgage LLC Waters 5019 State & Zip Code Check one. | more than one secured claim, list the creditor is a particular claim, list the other creditors in Pical order according to the creditor's name. Describe the property that secures the claim 1984 S Pinecreek Orland Park, 60467 Cook County As of the date you file, the claim is: Check apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortg car loan) Statutory lien (such as tax lien, mechanic Judgment lien from a lawsuit | aim: IL all that | Amount of claim Do not deduct the value of collateral. \$232,092.00 | Value of collateral that supports this claim | Unsecured portion |

Add the dollar value of your entries in Column A on this page. Write that number here: \$232,092.00 If this is the last page of your form, add the dollar value totals from all pages. \$232,092.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| Debtor 1 Lisa A Lois! Tiris Name Middle Name Last Name La | | | Document | Page 19 | 9 of 49 | |
|--|--|---|--|---|---|---|
| Piret Name Model Name Last Name La | Fill in this in | formation to identify your | case: | | | |
| Piret Name Model Name Last Name La | Debtor 1 | Lisa A Loisi | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number | | | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims that the support of the country of the co | | | | | | |
| Case number Check if this is an amended filing | (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| Check if this is an amended filling Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be accomplete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to recently contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts and Unexpired Lasses (Official Form 16AB) and elim. Also list executory contracts and Unexpired Lasses (Official Form 16AB) and elim. Also list executory contracts and Unexpired Lasses (Official Form 16ABP) and elim. Also list executory contracts and University of the schedule of the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your amen and case number (if known). Port 3: List All of Your PRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims. Blat credit separately for each claim. File a creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims. Blat credits separately for each claim listed, identify what type of claim is is. Do not list claims already included in Part 1. If more than | United States | s Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| Check if this is an amended filling Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be accomplete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to recently contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts on schedule ABP: Property (Official Form 16AB) and elim. Also list executory contracts and Unexpired Lasses (Official Form 16AB) and elim. Also list executory contracts and Unexpired Lasses (Official Form 16AB) and elim. Also list executory contracts and Unexpired Lasses (Official Form 16ABP) and elim. Also list executory contracts and University of the schedule of the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your amen and case number (if known). Port 3: List All of Your PRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims. Blat credit separately for each claim. File a creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims. Blat credits separately for each claim listed, identify what type of claim is is. Do not list claims already included in Part 1. If more than | | | | | | |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to receive your contracts or unexplied leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106/B) and on chedule 6: Executory Contracts and Unexpired Leases (Official Form 106/B). Do not include any creditors with partially secured claims that are listed in the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your pame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims I be any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List All of Your NONPRIORITY Unsecured Claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the creditor separately for each claim. If a creditor has more than one comprisity unsecured claims list of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims list of claims listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular list | | r | | | | ☐ Check if this is an |
| Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims as complete and accurate as possible, Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party for preventive contracts or amprehensive that or out desult in a claim. Also list severative contracts on Schedule AB: Property (Official Form 1968) and on or schedule 6: Executory Contracts and Unexpired Leases (Official Form 1965). Do not include any creditors with Part Claims Secured Port Property if more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your amen and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the order creditors in Part 3.1 you have more than three nonpriority unsecured claims all reports and provided in Part 1.1 more than one creditor holds a particular claim, list the other creditors in Part 3.1 you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. As of the date you file, the claim is: Check all that apply When was the debt incurred? Polebor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Contingent Continge | (. | | | | | _ |
| Base complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to recent processor contracts or uncertact and Unexpired Leases (Official Form 1066). Do not include any creditors with Nanpariority contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule D. Creditors With Date Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). Part 3: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. | | | | | | amenaea ming |
| List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? Yes. | Official F | orm 106E/F | | | | |
| List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? Yes. | Schedule | e E/F: Creditors W | ho Have Unsecured | Claims | | 12/15 |
| 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. | any executory Schedule G: E: Schedule D: Ci eft. Attach the name and case | contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec Continuation Page to this page a number (if known). | that could result in a claim. Also I ired Leases (Official Form 106G). I ured by Property. If more space is le. If you have no information to re | ist executory o Do not include needed, copy t | ontracts on Schedule A/B: Property any creditors with partially secured he Part you need, fill it out, number | (Official Form 106A/B) and on claims that are listed in the entries in the boxes on the |
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| Yes. | 1. Do any cr | editors have priority unsecure | d claims against you? | | | |
| List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. | No. Go | to Part 2. | | | | |
| 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. | Yes. | | | | | |
| No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Bank Of America | Part 2: Li | st All of Your NONPRIORIT | Y Unsecured Claims | | | |
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| List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim | □ No. Yo | u have nothing to report in this p | art. Submit this form to the court with | vour other sche | edules. | |
| 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim | | 3 | | , | | |
| unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim | ■ Yes. | | | | | |
| Bank Of America Last 4 digits of account number O186 \$14,623.00 | unsecured than one o | I claim, list the creditor separately | y for each claim. For each claim listed | d, identify what t | ype of claim it is. Do not list claims alre | ady included in Part 1. If more |
| Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No Debtor 1 onfset Opened 10/01 Last Active 2/13/13 Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | | | Total claim |
| Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No Debtor 1 onfset Opened 10/01 Last Active 2/13/13 Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 4.1 Ban | k Of America | Last 4 digits of acc | ount number | 0186 | \$14.623.00 |
| When was the debt incurred? Greensboro, NC 27410 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 2/13/13 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 NONPRIORITY unsecured claim: Debtor 7 Only Debtor 8 Only Debtor 9 Only Debto | | | | | | Ψ14,020.00 |
| Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising plans, and other similar debts | | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | When was the deb | t incurred? | 2/13/13 | |
| Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts | | | As of the date you | file. the claim i | s: Check all that apply | |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | | • • | • | , | | |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | ■ De | ebtor 1 only | ☐ Contingent | | | |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts | | • | | | | |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | | | _ ' | | | |
| ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts | | · | · · | RITY unsecured | I claim: | |
| debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No | | | | | | |
| Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts | | HECK II THIS CIAIM IS TOF A COMI | nunity | nd out of a sena | ration agreement or divorce that you di | id not |
| ••• | | e claim subject to offset? | | | .a.a. agreement of divorce that you di | <u> </u> |
| ☐ Yes ☐ Other Specify Credit Card | ■ No | 0 | ☐ Debts to pension | or profit-sharin | g plans, and other similar debts | |
| | □ Ye | es | Other Specify | Credit Card | | |

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Debtor 1 Lisa A Loisi Case number (if know) 4.2 \$18,053.00 **Chase Card** Last 4 digits of account number 3412 Nonpriority Creditor's Name Opened 8/30/93 Last Active Po Box 15298 When was the debt incurred? 2/26/13 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.3 **Chase Card** 9340 Last 4 digits of account number \$12,365.00 Nonpriority Creditor's Name Opened 3/17/05 Last Active Po Box 15298 When was the debt incurred? 7/08/12 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.4 Citibank / Sears Last 4 digits of account number 3384 \$3.670.00 Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Opened 03/02 Last Active When was the debt incurred? 10/24/13 Bankruptcy Po Box 790040 S Louis, MO 63129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account

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Debtor 1 Lisa A Loisi Case number (if know) 4.5 \$9,284.00 **Discover Financial** Last 4 digits of account number 4014 Nonpriority Creditor's Name Opened 02/03 Last Active Po Box 3025 When was the debt incurred? 3/03/13 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.6 Kohls/Capital One 0612 Last 4 digits of account number \$3,609.00 Nonpriority Creditor's Name **Kohls Credit** Opened 03/99 Last Active Po Box 3043 When was the debt incurred? 3/11/13 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Charge Account** Other, Specify 4.7 **Merchants Credit** Last 4 digits of account number 0169 \$2,250.00 Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? **Opened 04/14** Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Adventist Hinsdale** ■ Other. Specify Hospital ☐ Yes

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Debtor 1 Lisa A Loisi 4.8 \$733.00 **Merchants Credit** Last 4 digits of account number 0168 Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? **Opened 04/14** Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Adventist Hinsdale** Other. Specify Hospital ☐ Yes 4.9 **Merchants Credit** Last 4 digits of account number 0084 \$47.00 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 04/14 Last Active When was the debt incurred? Ste 700 2/28/15 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Adventist Hinsdale** ☐ Yes Other. Specify Hospital 4.1 Midland Funding 0726 \$1,156.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 05/16** Po Box 939069 San Diego, CA 92193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Factoring Company Account Citibank N.A. ☐ Yes

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Lisa A Loisi Case number (if know)

| Debto | r 1 Lisa A Loisi | | Case number (if know) | | | | | |
|-------|---|---|---|-------------|--|--|--|--|
| 4.1 | Portfolio Recovery | Last 4 digits of account number | 6628 | \$23,359.00 | | | | |
| | Nonpriority Creditor's Name Po Box 41067 | When was the debt incurred? | Opened 07/14 | | | | | |
| | Norfolk, VA 23541 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | 7.0 0. 11.0 44.0 , 04 11.0, 11.0 0.41111 | er chook an unit apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | ☐ Yes | ■ Other. Specify Factoring (Bank | Company Account Synchrony | | | | | |
| 4.1 | Portfolio Recovery | Last 4 digits of account number | 8048 | \$3,310.00 | | | | |
| | Nonpriority Creditor's Name Po Box 41067 Norfolk VA 23544 | When was the debt incurred? | Opened 05/14 | | | | | |
| | Norfolk, VA 23541 Number Street City State Zlp Code | | | | | | | |
| | Who incurred the debt? Check one. | , | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | | |
| | Yes | ■ Other. Specify Factoring (| Company Account Citibank N.A. | | | | | |
| 4.1 | Portfolio Recovery | Last 4 digits of account number | 1708 | \$2,776.00 | | | | |
| | Nonpriority Creditor's Name Po Box 41067 | When was the debt incurred? | Opened 03/14 | | | | | |
| | Norfolk, VA 23541 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | • , | , | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | □ Yes | Factoring (Other. Specify Retail Bank | Company Account Ge Capital | | | | | |

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Debtor 1 Lisa A Loisi Case number (if know) 4.1 **Portfolio Recovery** 7531 \$1,242.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Po Box 41067 When was the debt incurred? **Opened 08/15** Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account World** ☐ Yes Other. Specify **Financial Network Bank** 4.1 \$1,115.00 Portfolio Recovery 1452 Last 4 digits of account number Nonpriority Creditor's Name Po Box 41067 When was the debt incurred? **Opened 12/14** Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank 4.1 Portfolio Recovery 4864 \$985.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Po Box 41067 When was the debt incurred? **Opened 01/15** Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account World** ☐ Yes Other Specify Financial Network Bank

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| Debtor 1 | Lisa A Lo | oisi | | Case r | number (if k | now) | | | |
|----------------------|-------------------------------|---|---|---------------|---------------|---------------------------|---------------------------|--|--|
| | Stephen He | = | Last 4 digits of account number | 0239 | | | \$1,595.00 | | |
| | Ionpriority Cred O Box 300 | | When was the debt incurred? | 2016 | | | | | |
| | Salem, OR | | _ | | | | | | |
| | | City State Zlp Code the debt? Check one. | As of the date you file, the claim | is: Check | call that app | bly | | | |
| | Debtor 1 onl | ly | ☐ Contingent | | | | | | |
| Г | Debtor 2 onl | lv | ☐ Unliquidated | | | | | | |
| _ | _ | d Debtor 2 only | ☐ Disputed | | | | | | |
| _ | _ | of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| _ | _ | s claim is for a community | ☐ Student loans | | | | | | |
| d | ebt | bject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration ag | reement or | divorce that you did not | | | |
| _ | _ | bject to onset? | Debts to pension or profit-sharir | a plana | and ather si | milar dahta | | | |
| | ■ No □ Yes | | Other. Specify Dental Serv | • | and other si | milai debis | | | |
| | | | Other. Specify | 71003 | | | | | |
| 4.1 8 | Synchrony | Bank/Sams | Last 4 digits of account number | 4893 | | | \$8,359.00 | | |
| | Ionpriority Cred | ditor's Name | - | | | | | | |
| | Po Box 965 Orlando, FL | | When was the debt incurred? | Oper 8/12/ | | 2 Last Active | | | |
| | | City State Zlp Code | As of the date you file, the claim | is: Check | call that app | bly | | | |
| V | Vho incurred t | the debt? Check one. | | | | | | | |
| I | Debtor 1 on | ly | ☐ Contingent | | | | | | |
| | Debtor 2 onl | ly | ☐ Unliquidated | | | | | | |
| | Debtor 1 and | d Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | | |
| | At least one | of the debtors and another | | | | | | | |
| _ | _ | s claim is for a community | □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account | | | | | | |
| | ebt | | | | | | | | |
| ls | s the claim su | bject to offset? | | | | | | | |
| | No | | | | | | | | |
| | ☐ Yes | | | | | | | | |
| Part 3: | List Others | s to Be Notified About a Deb | t That You Already Listed | | | | | | |
| | | | out your bankruptcy, for a debt that y | ou alrea | dy listad in | Parts 1 or 2 For axamn | la if a collection agency | | |
| is trying have mo | to collect fro | m you for a debt you owe to son | neone else, list the original creditor in you listed in Parts 1 or 2, list the addi | Parts 1 | or 2, then I | ist the collection agency | here. Similarly, if you | | |
| Part 4: | Add the A | mounts for Each Type of Uns | secured Claim | | | | | | |
| | e amounts of unsecured cla | | ns. This information is for statistical r | eporting | purposes | only. 28 U.S.C. §159. Add | the amounts for each | | |
| | | | | | | Total Claim | | | |
| | 6a. | Domestic support obligations | | 6a. | \$ | 0.00 | | | |
| To claiı | | | | | | | • | | |
| from Par | | Taxes and certain other debts | you owe the government | 6b. | \$ | 0.00 | | | |
| | 6c. | Claims for death or personal in | jury while you were intoxicated | 6c. | \$ | 0.00 | | | |
| | 6d. | Other. Add all other priority unse | cured claims. Write that amount here. | 6d. | \$ | 0.00 | - | | |
| | 6e. | Total Priority. Add lines 6a throu | ugh 6d. | 6e. | \$ | 0.00 | | | |
| | | | | | | | | | |
| | 24 | Chirdont lo | | Cf | | Total Claim | | | |
| То | 6f. tal | Student loans | | 6f. | \$ | 0.00 | - | | |
| claiı | ms | | | | | | | | |
| from Par | t 2 6g. | Obligations arising out of a se you did not report as priority c | paration agreement or divorce that | 6g. | \$ | 0.00 | | | |
| | 6h. | | ring plans, and other similar debts | 6h. | \$ | | - | | |

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> 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 108,531.00 Total Nonpriority. Add lines 6f through 6i. 6j. 108,531.00

Official Form 106 E/F

| | | TATAL THE STATE OF | $\frac{1}{1}$ | |
|---------------------|--------------------------|--|---------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lisa A Loisi | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|-------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.2 | Ony | | Clato | Zii Codo | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | Ony | | Clato | 211 0000 | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | Number | Sileet | | | |
| | City | | State | ZIP Code | - |
| | | | | | |

| | | Docume | nt Page 28 d | of 49 | |
|---|---|--|---------------------------|---|---|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Lisa A Loisi | | | | |
| DCDIOI 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb | ner . | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Sched Codebtors abeople are sill it out, ar | filing together, both are equand number the entries in the | re also liable for any deb ally responsible for supp boxes on the left. Attach | olying correct informat | es complete and accurate as tion. If more space is needed to this page. On the top of a | d, copy the Additional Page, |
| | and case number (if known | , , | | | |
| 1. Do y | ou have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| Arizona No. | a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo | , Nevada, New Mexico, Pu | erto Rico, Texas, Wash | ry? (Community property state ington, and Wisconsin.) | es and territories include |
| in line Form 1 | 2 again as a codebtor only | f that person is a guaran | tor or cosigner. Make | sure you have listed the cre | n you. List the person shown editor on Schedule D (Official dule E/F, or Schedule G to fill |
| | Column 1: Your codebtor lame, Number, Street, City, State and Z | IP Code | | Column 2: The creditor Check all schedules that | to whom you owe the debt tapply: |
| 3.1 | | | | Cohodula Dilina | |
| | Name | | | ☐ Schedule D, line | |
| | | | | ☐ Schedule E/F, line☐ Schedule G, line☐ | |
| _ | | | | | |
| | Number Street City | State | ZIP Code | | |
| | Jily | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule D, line ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| _ | | | | | |
| | Number Street | 01-1- | 710.0 | | |
| (| City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | I | | | |
|-------------|---|----------------------------|-----------------------------------|-------------|-------|--------------------|---|--------------------------|-------|
| | otor 1 Lisa A Loisi | | | | | | | | |
| | otor 2 | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| | se number | | | | | | nded filing ement showir | ng postpetition cha | pter |
| 0 | fficial Form 106I | | | | | MM / DI | D/ YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | r spouse is not filing wi | th you, do not includ | de infor | matio | on about your | spouse. If m | ore space is need | ded, |
| 1. | Fill in your employment information. | | Debtor 1 ■ Employed | | | Debt | Debtor 2 or non-filing spouse ■ Employed | | |
| | If you have more than one job, attach a separate page with | Employment status | | | | ■ Er | | | |
| | information about additional employers. | , ., | ☐ Not employed | | | □ No | ot employed | | |
| | Include part-time, seasonal, or | Occupation | Finance Clerk | | | | | | |
| | self-employed work. | Employer's name | Darien Park Dist | rict | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 7301 Fairview Darien, IL 60561 | | | | | | |
| | | How long employed t | here? 4 years | | | | | | _ |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | port for | any l | line, write \$0 in | the space. In | clude your non-filir | ng |
| , | u or your non-filing spouse have mo e space, attach a separate sheet to | . , , | ombine the information | n for all o | emplo | oyers for that pe | erson on the I | ines below. If you r | need |
| | | | | | | For Debtor 1 | | ebtor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 1,640.2 | <u>8</u> \$ | 0.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.0 | 10 +\$ | 0.00 | |

1,640.28

\$

0.00

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1 | Lisa A Loisi | - | (| Case | number (if known |) | | | | |
|-----|-------------------|---|-----------------------|-----|----------------------|----------------------|----------|----------------|----------------|----------------------|-------------------|
| | | | | | For | r Debtor 1 | | | Debtor | 2 or | |
| | Сор | y line 4 here | 4. | | \$_ | 1,640.28 | 3 | \$ | illing 3 | 0.00 | |
| 5. | l ist | all payroll deductions: | | | | | | | | | |
| 0. | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 317.89 | | \$ | | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ - | 0.00 | _ | \$ | | 0.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$_ | 0.00 | _ | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | 0.00 | _ | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e | | \$ | 0.00 | _ | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | _ | \$ | | 0.00 | _ |
| | 5g. | Union dues | 5g | ١. | \$ | 0.00 |) | \$ | | 0.00 | _ |
| | 5h. | Other deductions. Specify: | 5h | .+ | \$ | 0.00 | <u> </u> | + \$ | | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 317.89 | 9 | \$ | | 0.00 | - I |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 1,322.39 | • | \$ | | 0.00 | |
| 8. | 8b. 8c. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | 8a 8b 8c. 8d | i. | \$ _ \$ _ \$ _ | 0.00 0.00 0.00 | <u>)</u> | \$ \$ | | 0.00 0.00 0.00 | |
| | 8e. | Social Security | 8e | ٠. | \$ | 0.00 | _ | \$ | | 0.00 | _ |
| | 8f. 8g. 8h. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: | 8f. 8g 8h | ١. | \$_ \$_ \$_ | 0.00 0.00 0.00 | <u>)</u> | \$ + \$ | | 0.00 0.00 0.00 | |
| | 0111 | | _ ''' | ··· | <u> </u> | | _ | | | 0.00 | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | 9 | <u> </u> | 0.00 |) | \$ | | 0.0 | 0 |
| 10 | Cala | vulate manthly income. Add line 7 + line 0 | 10. | φ. | | 1,322.39 + | ው | | 0.00 | · | 1,322.39 |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ_ | | 1,322.39 | Ψ_ | | 0.00 | - | 1,322.39 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depe | | | | | | chedule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | | 12. | \$ | 1,322.39 |
| | | | | | | | | | | Combi month | ned ly income |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | ? | | | | | | | | |
| | _ | No. Yes Explain: | | | | | | | | | |

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| | n this informati | tion to identify yo | ur caea | | | | | |
|-------------|--------------------------|-------------------------------------|------------------------|--|---|-------------|-------------------------------------|-------------------------------|
| | | | ui case. | | | | | |
| Debt | tor 1 | Lisa A Loisi | | | | | ck if this is: | |
| Debt | tor 2 | | | | | _ | An amended filing A supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | _ | 13 expenses as of | 01 1 |
| Unite | ed States Bankru | uptcy Court for the: | NORTH | HERN DISTRICT OF ILLIN | OIS | - | MM / DD / YYYY | |
| l | e number nown) | | | | | | | |
| (11 10 | | | | | | | | |
| Of | ficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your I | Exper | nses | | | | 12/15 |
| Be a | as complete a | and accurate as | possible eded, atta | . If two married people and the contract is the contract that and the contract is the contract in the contract in the contract in the contract is the contract in the contract | | | | |
| Part 1. | 11: Descri | ibe Your House | hold | | | | | |
| ١. | | | | | | | | |
| | ■ No. Go to | | n a conar | ate household? | | | | |
| | □ res. Doe s | | ii a sepai | ate nousenoiu: | | | | |
| | | | t file Offic | ial Form 106J-2, Expenses | s for Separate Housel | hold of Deb | tor 2. | |
| 0 | | | _ | | re. Coparato ricuco. | | | |
| 2. | Do you have | e dependents? | ☐ No | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents r | names. | | | Daughter | | 4 | Yes |
| | | | | | - | | | □ No |
| | | | | | Daughter | | 14 | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 2 | De veur eve | anaaa inaluda | _ | | | | | ☐ Yes |
| 3. | | enses include people other th | han | No | | | | |
| | | d your depender | | Yes | | | | |
| Dort | - 2: Estima | ate Your Ongoir | na Manth | ly Evnances | | | | |
| Esti exp | imate your ex | penses as of yo | our bankr | uptcy filing date unless y y is filed. If this is a supp | | | | |
| Incl | ude expenses | s paid for with r | າon-cash | government assistance i | f vou know | | | |
| the | value of such | n assistance and | | cluded it on Schedule I: | | | Your expe | enses |
| (On | icial Form 10 | б і.) | | | | | Tour expe | |
| 4. | | r home owners d any rent for the | | nses for your residence. I or lot. | nclude first mortgage | 4. \$ | . | 2,142.71 |
| | If not include | ed in line 4: | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. \$ | 3 | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 |
| | • | • | | upkeep expenses | | 4c. \$ | | 0.00 |
| | | owner's associat | | | | 4d. \$ | 3 | 0.00 |
| 5. | Additional n | nortgage payme | ents for ve | our residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| Deb | otor 1 | Lisa A L | oisi | Case nun | mber (if known) | |
|-----|---------|----------------|--|----------------------------------|------------------|-------------------------------|
| 6. | Utiliti | ies: | | | | |
| ٥. | 6a. | | , heat, natural gas | 6a. | . \$ | 214.44 |
| | 6b. | Water, sev | wer, garbage collection | 6b. | . \$ | 144.28 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | . \$ | 249.00 |
| | 6d. | Other. Spe | ecify: | 6d. | . \$ | 0.00 |
| 7. | Food | l and hous | ekeeping supplies | 7. | . \$ | 1,000.00 |
| 8. | | | children's education costs | 8. | . \$ | 80.00 |
| 9. | Cloth | ning, laund | ry, and dry cleaning | 9. | . \$ | 50.00 |
| 10. | | • | products and services | 10. | . \$ | 50.00 |
| | | - | ntal expenses | 11. | . \$ | 50.00 |
| | | | Include gas, maintenance, bus or train fare. | | | |
| | | | ar payments. | | . \$ | 150.00 |
| 13. | Enter | rtainment, | clubs, recreation, newspapers, magazines, and books | 13. | . \$ | 60.00 |
| 14. | Chari | itable cont | ributions and religious donations | 14. | . \$ | 0.00 |
| 15. | Insur | rance. | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insura | ance | 15a. | * | 28.13 |
| | 15b. | Health ins | urance | 15b. | . \$ | 0.00 |
| | 15c. | Vehicle in: | surance | 15c. | . \$ | 65.00 |
| | 15d. | Other insu | rance. Specify: | 15d. | . \$ | 0.00 |
| 16. | | | nclude taxes deducted from your pay or included in lines 4 or 2 | 0. | | |
| | Speci | , | | 16. | . \$ | 0.00 |
| 17. | | | ease payments: | | | |
| | | | ents for Vehicle 1 | 17a. | · | 0.00 |
| | | | ents for Vehicle 2 | 17b. | | 0.00 |
| | | Other. Spe | | 17c. | . \$ | 0.00 |
| | | Other. Spe | | 17d. | . \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not re | | Φ. | 0.00 |
| 40 | | | your pay on line 5, Schedule I, Your Income (Official Form | 106I). 10. | . \$ | |
| 19. | | | s you make to support others who do not live with you. | 40 | \$ | 0.00 |
| 00 | Speci | · | anticonnance and included in lines 4 on 5 of this forms on a | 19. | | |
| 20. | | | erty expenses not included in lines 4 or 5 of this form or on some son other property | on <i>Scriedule I: Y</i> 20a. | | 0.00 |
| | | Real estat | | 20a. 20b. | | 0.00 |
| | | | | 20b. 20c. | · | - |
| | | | homeowner's, or renter's insurance | 20d. 20d. | | 0.00 |
| | | | nce, repair, and upkeep expenses ler's association or condominium dues | | | 0.00 |
| 0.4 | | | er's association of condominium dues | 20e. | · - | 0.00 |
| 21. | Otne | r: Specify: | | 21. | +\$ | 0.00 |
| 22. | Calcu | ulate vour | monthly expenses | | | |
| | | | through 21. | | \$ | 4,283.56 |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form 1 | 06J-2 | \$ | |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 4,283.56 |
| | 220.7 | rida iirio 22i | a and 225. The result is your monthly expenses. | | Ψ ——— | 4,203.30 |
| 23. | Calcu | ulate your | monthly net income. | | | |
| | 23a. | Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | . \$ | 1,322.39 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 23b. | \$ | 4,283.56 |
| | | | | | | |
| | 23c. | | our monthly expenses from your monthly income. | 00- | · | -2 061 17 |
| | | The result | is your monthly net income. | 23c. | . \$ | -2,961.17 |
| 0.4 | D | | and the second of the second o | aftan way file di | | |
| 24. | | | an increase or decrease in your expenses within the year or by expect to finish paying for your car loan within the year or do you exp | | | ease or decrease because of a |
| | | | terms of your mortgage? | Jest your mongage | Payment to micre | case of uccicase pecause of a |
| | ■ No | | , | | | |
| | | | Explain here: | | | |
| | 1 I V c | 20 | i explain nere: | | | |

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| Fill in this info | | | | | |
|---------------------|--|--------------------------|-----------------------------|---|-----------------------------------|
| | mation to identify your | case: | | | |
| Debtor 1 | Lisa A Loisi First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | _ | eck if this is an ended filing |
| Official For | | | | | |
| Declarat | tion About a | in Individual | Debtor's Scl | nedules | 12/15 |
| | 18 U.S.C. §§ 152, 1341, 1 n Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out ba | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | Attach Bankruptcy Petition Declaration, and Signature | |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules filed | with this declaration and | |
| X /s/ Lis | a A I oisi | | X | | |
| Lisa A | | | Signature of D | Debtor 2 | |
| Date | May 9, 2017 | | Date | | |

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| Fill i | n this infor | mation to identify you | r case: | | | |
|---------------|------------------------|--|-------------------------------|---|-------------------------------|------------------------------------|
| Debt | or 1 | Lisa A Loisi | | | | |
| D. I. | 0 | First Name | Middle Name | Last Name | | |
| Debt (Spou | or 2 se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Coor | e number | | | | | |
| (if kno | | | | | | Check if this is an |
| | | | | | | amended filing |
| | | | | | | |
| Off | icial Fo | orm 107 | | | | |
| Sta | temen | t of Financial | Affairs for Indiv | iduals Filing for E | Bankruptcy | 4/1 |
| | | | | e are filing together, both are | | |
| | | nore space is needed n). Answer every que | | to this form. On the top of an | y additional pages, write y | our name and case |
| | | , , , , , , | | and hard Before | | |
| Part | Give | Details About Your Mi | arital Status and Where Y | ou Livea Betore | | |
| 1. \ | What is you | ur current marital state | ıs? | | | |
| ı | ☐ Marrie | d | | | | |
| ı | ☐ Not ma | arried | | | | |
| 2. I | During the | last 3 years, have you | lived anywhere other tha | n where you live now? | | |
| i | . | | | | | |
| | ■ No □ Yes Li | st all of the places you | lived in the last 3 years. Do | not include where you live nov | N. | |
| | | , , | · | • | | |
| | Debtor 1 P | rior Address: | Dates Debtor lived there | 1 Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there |
| 3. \ | Within the | laat 9 yaara did yay a | var liva with a anauga ar | logal aquivalent in a commu | nity proporty state or torrit | |
| | | | | legal equivalent in a commu Nevada, New Mexico, Puerto R | | |
| | ■ Na | | | | | |
| | ■ No □ Yes.M | ake sure you fill out Sc | hedule H: Your Codebtors | (Official Form 106H). | | |
| | | , | | (C | | |
| Part | 2 Expla | in the Sources of You | ır Income | | | |
| 4. I | Did vou ha | ve anv income from e | nplovment or from opera | ting a business during this y | ear or the two previous ca | lendar vears? |
| ı | Fill in the to | al amount of income yo | ou received from all jobs an | d all businesses, including part | -time activities. | • |
| | ir you are iii | ing a joint case and you | nave income that you rece | eive together, list it only once u | nder Debtor 1. | |
| - 1 | No | | | | | |
| | ☐ Yes. F | II in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | | | ONOIGOIOIIO) | | and oxolusions; |

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| | | 0 | 200 11 | 1-1011 | D00 1 | Document | - · | Page 35 of 4 | 10 | , 10.00.0 | <i>D D C C C C C C C C C C</i> | Jiviani |
|-----------|---|--|---|---|---|---|--|---|--|---|---|---|
| Del | otor 1 | Lisa | A Loisi | | | Document | | age 33 of c | ase num | nber (if known) | | |
| 5. | Did you Include and oth winning List ea | e inco her pu gs. If | eeive any o me regard ublic benef you are filii | less of wheth it payments; ng a joint cas ne gross inco | ner that incompensions; rese and you h | s year or the two presents taxable. Examental income; interesave income that your change of source separate | Groseach (befo | us calendar year: If other income are dends; money collived together, list | e alimon llected frr it only on the that you | y; child suppo om lawsuits; nce under De | royalties; and obtor 1. e 4. | Gross income (before deductions and exclusions) |
| Par | t 3: | l ict C | Cortoin Bo | ımanta Vall | Mada Bafa | re You Filed for Ba | onkrur | ato. | | | | |
| 6. | ■ Y | es. I | Neither De ndividual properties No. Suring the No. Yes * Subject to Debtor 1 or During the No. Yes | shor 1 nor Derimarily for a 90 days befor Go to line 7 List below 6 paid that cronot include o adjustment r Debtor 2 o 90 days befor Go to line 7 List below 6 include pay attorney for | personal, far you filed to each creditor. Do not payments to ton 4/01/19 or both have been eyou filed to each creditor. | amily, or household for bankruptcy, did to whom you paid of include payments of an attorney for this and every 3 years a primarily consum for bankruptcy, did to whom you paid omestic support obloticy case. | ner del purpos you pa a total s for do s bank after the ner del you pa a total igation | bts. Consumer dese." by any creditor a to of \$6,425* or more of support observed to case see the consumer and the case see the consumer and the case see the consumer and case see the consumer and case see the consumer and case see the cas | otal of \$6 re in one bligation: on or aft otal of \$6 and the t | e or more pays, such as cher the date of 600 or more? | re? ments and th ild support ar f adjustment. f adjustment. vou paid that Also, do not in | nd alimony. Also, do creditor. Do not nolude payments to an |
| | Credi | tor's | Name and | Address | | Dates of paymen | t | Total amount paid | | nount you still owe | Was this p | ayment for |
| 7. | Insider of whice a busin alimon | rs incl ch you ness y y. lo les. Li | ude your r u are an off you operate st all paym | elatives; any icer, director e as a sole p e as to an in | general pari , person in c roprietor. 11 | | ny gen 20% o | ent on a debt you eral partners; part r more of their vot | u owed a tnerships ting secu | anyone who s of which you irities; and an | u are a gener ny managing a s, such as chi | al partner; corporation agent, including one fo ild support and |
| | Inside | er's N | lame and | Address | | Dates of payment | t | Total amount | | nount you | Reason for | this payment |
| | | | | | | | | paid | | still owe | | |
| 8. | Within | 1 ye | ar before | ou filed for | bankruptcy | , did you make ar | ny pay | ments or transfe | r any pr | operty on ac | count of a | lebt that benefited an |

8 insider?

Include payments on debts guaranteed or cosigned by an insider.

☐ Yes. List all payments to an insider

Insider's Name and Address Reason for this payment **Dates of payment Total amount** Amount you paid still owe Include creditor's name

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Case number (if known) Document Debtor 1 Lisa A Loisi

| Pa | rt 4: Identify Legal Actions, Repossess | ions, and Foreclosures | | | | | |
|-----|---|--|-------------------------------|-----------------------------|---------------------------|--|--|
| 9. | Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | Status of th | e case | | |
| 10. | Within 1 year before you filed for bankru Check all that apply and fill in the details be | | erty repossessed, foreclos | ed, garnished, attached | I, seized, or levied? | | |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | ate Value of the property | | |
| | | Explain what happene | d | | | | |
| 11. | Within 90 days before you filed for banks accounts or refuse to make a payment b No Yes. Fill in the details. | | luding a bank or financial | institution, set off any a | mounts from your | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date action was taken | Amount | | |
| | No Yes Tt 5: List Certain Gifts and Contribution Within 2 years before you filed for bankr | | s with a total value of mor | e than \$600 per person? | , | | |
| | Yes. Fill in the details for each gift. Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and Address: | Describe the gifts | | Dates you gave the gifts | Value | | |
| 14. | Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or co | | s or contributions with a t | otal value of more than | \$600 to any charity? | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | otal Describe what you | u contributed | Dates you contributed | Value | | |
| Pa | rt 6: List Certain Losses | | | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | ptcy or since you filed for b | oankruptcy, did you lose a | nything because of thef | t, fire, other disaster, | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Describe the property you lost and how the loss occurred | Describe any insurance co Include the amount that insurance claims on line 33 | ırance has paid. List pendinç | Date of your loss | Value of property lost | | |

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Page 37 of 49 Case number (if known) Debtor 1 Lisa A Loisi

| Par | 7: List Certain Payments or Transfers | | | | | |
|-----|--|----------------------------------|----------------------------|----------------|--|---|
| | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | transferred | value of any prope | rty | Date payment or transfer was made | Amount of payment |
| | Eric G. Zelazny 18400 Maple Creek Drive Tinley Park, IL 60477 | \$2000.00 plus | costs | | February, 2017 | \$2,000.00 |
| | Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that y | tors or to make payment | | | r transfer any prop | erty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and transferred | value of any prope | rty | Date payment or transfer was made | Amount of payment |
| | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and property transfe | | | any property or received or debts change | Date transfer was made |
| | Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p ■ No □ Yes. Fill in the details. | | ny property to a se | lf-settled tru | st or similar device | of which you are a |
| | Name of trust | Description and | value of the proper | ty transferre | ed | Date Transfer was made |
| Par | List of Certain Financial Accounts, I | nstruments, Safe Depos | it Boxes, and Stora | ge Units | | |
| | Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass | , or other financial accou | unts; certificates of | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clo mo | te account was sed, sold, ved, or | Last balance before closing or transfer |

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Debtor 1 Lisa A Loisi

| 21. | . Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | |
|-----|--|---|--|-----------------------|--|
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit or p No | lace other than your home within 1 | year before you filed for bankruptcy? | | |
| | Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | |
| Par | t 9: Identify Property You Hold or Control for | Someone Else | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any proper | ty you borrowed from, are storing for, | or hold in trust | |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | |
| Par | t 10: Give Details About Environmental Inform | ation | | | |
| | | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | ir, land, soil, surface water, ground | — · | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | · · | aw, whether you now own, operate, o | r utilize it or used | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | mental law defines as a hazardous | waste, hazardous substance, toxic s | ubstance, | |
| Rep | ort all notices, releases, and proceedings that yo | | they occurred. | | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liable | under or in violation of an environme | ntal law? | |
| | ■ No | | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | | Governmental unit | Environmental law if you | Date of notice | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and | | Pate of Hotice | |
| 23. | ■ No □ Yes. Fill in the details. Name of site | Governmental unit | Environmental law, if you | Date of no | |

Page 39 of 49 Case number (if known) Debtor 1 Lisa A Loisi 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lisa A Loisi Lisa A Loisi Signature of Debtor 2 Signature of Debtor 1 Date May 9, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| | | | 3 | |
|--|--|---|--|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lisa A Loisi | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| If you are an ind creditors have you have leady You must file th which on the If two married p sign a Be as complete | lividual filing under chap we claims secured by you sed personal property a is form with the court we ever is earlier, unless the form eople are filing together and date the form. | oter 7, you must fil ur property, or nd the lease has n ithin 30 days after e court extends th in a joint case, bo | | e set for the meeting of creditors, the creditors and lessors you list at information. Both debtors must |
| Part 1: List Y | our Creditors Who Have | e Secured Claims | | |
| 1. For any credi | - | art 1 of Schedule D | : Creditors Who Have Claims Secured by Propo | erty (Official Form 106D), fill in the |
| | reditor and the property the | nat is collateral | What do you intend to do with the property t secures a debt? | hat Did you claim the property as exempt on Schedule C? |
| Creditor's | | | По 1 и | |
| name: | | | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| | | | ☐ Retain the property and redeem it. | ☐ Yes |
| Description of property | f | | Reaffirmation Agreement. | |
| securing debt | r. | | ☐ Retain the property and [explain]: | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | — 140 |
| | | | ☐ Retain the property and enter into a | ☐ Yes |

Official Form 108

Creditor's

Description of

securing debt:

Description of

securing debt:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

Reaffirmation Agreement.

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

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| Debtor 1 | Lisa A Loisi | Case number (if known) | |
|--|--|--|---------------------------------|
| name: Descrip | | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| securin | • | Helain the property and [explain]. | = |
| For any u | rmation below. Do not list real est | perty Leases that you listed in Schedule G: Executory Contracts and Unexpired ate leases. Unexpired leases are leases that are still in effect; the operty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | lease period has not yet ended. |
| | | | Will the lease be assumed? |
| Describe | your unexpired personal property | reases | will the lease be assumed? |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r | | | □ No |
| Description Property: | on of leased | | ☐ Yes |
| | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's r | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's r | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's r | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Under per | Sign Below nalty of perjury, I declare that I have hat is subject to an unexpired least | e indicated my intention about any property of my estate that sec | cures a debt and any personal |
| | nat is subject to an unexpired leas Lisa A Loisi | x | |
| Lisa | a A Loisi ature of Debtor 1 | Signature of Debtor 2 | |
| Date | May 9, 2017 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-14577 Doc 1 Filed 05/09/17 Entered 05/09/17 16:33:02 Desc Main Document Page 46 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Lisa A Loisi | | Case No. | | | |
|-------|---|---|------------------------------------|---------------------------------|-------|--|
| | | Debtor(s) | Chapter | 7 | | |
| | DISCLOSURE OF COME | PENSATION OF ATTOR | NEY FOR DI | EBTOR(S) | | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplati | filing of the petition in bankruptcy, o | r agreed to be paid | to me, for services rendered of | or to | |
| | For legal services, I have agreed to accept | | \$ | 2,000.00 | | |
| | Prior to the filing of this statement I have receive | ved | . \$ | 2,000.00 | | |
| | | | | 0.00 | | |
| 2. | The source of the compensation paid to me was: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | |
| | ☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the | | | | . A | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | |
| | a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cred. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applications of the secure o | statement of affairs and plan which neditors and confirmation hearing, and to reduce to market value; exenations as needed; preparation a | nay be required; any adjourned hea | urings thereof; | ; | |
| 6. | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding. | | | es, relief from stay action | ıs or | |
| | | CERTIFICATION | | | | |
| | I certify that the foregoing is a complete statement of pankruptcy proceeding. | f any agreement or arrangement for p | ayment to me for 1 | epresentation of the debtor(s) | in | |
| N | /lay 9, 2017 | /s/ Eric Zelazny | | | | |
| Ī | Pate Pate | Eric Zelazny | | | | |
| | | Signature of Attorney Law Offices of Eric | : Zelazny | | | |
| | | 18400 Maple Creek | Drive Suite 600 |) | | |
| | | Chicago Heights, II 708-444-4333 | L 60411 | | | |
| | | eric@lwslaw.com | | | | |
| | | Name of law firm | | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Lisa A Loisi | | Case No. | |
|-------|--|---|-----------------------------------|------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | CRIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 11 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and correct to the b | pest of my |
| Date: | May 9, 2017 | /s/ Lisa A Loisi Lisa A Loisi Signature of Debtor | | |

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Chase Card Po Box 15298 Wilmington, DE 19850

Citibank / Sears Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Discover Financial Po Box 3025 New Albany, OH 43054

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Midland Funding Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

Nationstar Mortgage LLC 8950 Cypress Waters Blvd Coppell, TX 75019

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Stephen Heaney DDS PO Box 3000 Salem, OR 97302

Synchrony Bank/Sams Po Box 965060 Orlando, FL 32896